Mid-Hudson

Monthly Rates for Effective Dates 1/1/2027, 2/1/2027 & 3/1/2027

Orange, Putnam, Dutchess, Ulster, Sullivan & Delaware

Platinum	BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket		Employee	Emp/Spouse	Emp/Child(ren)	Family
Anthem Platinum EPO 5/25	PCP/Specialist: $5/$25 Deductible, Coinsurance: $0/$0, 0% Max OOP: $4,500/$9,000 Rx: $10/$35/$70 after $100/200 Rx deductible (n/a Tier 1) - Base	EPO	$2,462.25	$4,918.54	$4,181.65	$7,006.39
Anthem Blue Access Platinum EPO 5/25	PCP/Specialist: $5/$25 Deductible, Coinsurance: $0/$0, 0% Max OOP: $4,500/$9,000 Rx: $10/$35/$70 after $100/200 Rx deductible (n/a Tier 1) - Base	EPO	$2,260.95	$4,515.95	$3,839.46	$6,432.70
EmblemHealth Select Care Platinum Premier	PCP/Specialist: 3 free PCP visits then $10/$35 Deductible, Coinsurance: $300/$600, 20% - OON $4,000/$8,000, 50% Max OOP: $3,500/$7,000 - OON $10,000/$20,000 Rx: $5/$30/$75 after $100/200 Rx deductible (n/a Tier 1)	POS	$2,010.12	$4,014.30	$3,413.04	$5,717.85
UnitedHealthcare Choice Platinum EPO 20/30 FD-NC	PCP/Specialist: $20/$30 Deductible, Coinsurance: $0/$0, 0% Max OOP: $5,800/$11,600 Rx: $10/$35/$70	EPO	$1,672.75	$3,339.56	$2,839.51	$4,756.35
UnitedHealthcare Choice Platinum EPO 20/35 FD-M4	PCP/Specialist: $20/$35 Deductible, Coinsurance: $0/$0, 0% Max OOP: $7,500/$15,000 Rx: $10/$35/$70	EPO	$1,660.37	$3,314.79	$2,818.47	$4,721.07
UnitedHealthcare Choice Platinum EPO 10/40(80) FD-OB	PCP: $10 Adult, $0 Child | Specialist: Designated Network $40, non-DN $80 Deductible, Coinsurance: $0/$0, 20% Max OOP: $3,700/$7,400 Rx: $5/$40/$80	EPO	$1,610.53	$3,215.11	$2,733.73	$4,579.02
UnitedHealthcare Select Platinum EPO 20/30 FD-NI	PCP/Specialist: $20/$30 Deductible, Coinsurance: $0/$0, 0% Max OOP: $5,800/$11,600 Rx: $10/$35/$70	EPO	$1,657.08	$3,308.22	$2,812.88	$4,711.70

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Mid-Hudson

Monthly Rates for Effective Dates 1/1/2027, 2/1/2027 & 3/1/2027

Orange, Putnam, Dutchess, Ulster, Sullivan & Delaware

Gold	BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket		Employee	Emp/Spouse	Emp/Child(ren)	Family
Anthem Gold EPO 30/65	PCP/Specialist: $30/$65 Deductible, Coinsurance: $1,600/$3,200, 20% Max OOP: $7,500/$15,000 Rx: $10/$50/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$2,083.48	$4,161.01	$3,537.76	$5,926.91
Anthem Blue Access Gold EPO 30/60	PCP/Specialist: $30/$60 Deductible, Coinsurance: $0/$0, 0% Max OOP: $9,950/$19,900 Rx: $10/$65/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$2,006.64	$4,007.34	$3,407.13	$5,707.93
Anthem Blue Access Gold EPO 50/60	PCP/Specialist: $50/$60 Deductible, Coinsurance: $1,300/$2,600, 10% Max OOP: $7,750/$15,500 Rx: $10/$50/50% after $150/300 Rx deductible (n/a Tier 1) - Base	EPO	$1,925.21	$3,844.47	$3,268.69	$5,475.84
Anthem Blue Access Gold EPO 30/65	PCP/Specialist: $30/$65 Deductible, Coinsurance: $1,600/$3,200, 20% Max OOP: $7,500/$15,000 Rx: $10/$50/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$1,900.00	$3,794.05	$3,225.84	$5,403.99
EmblemHealth Select Care Gold Premier	PCP/Specialist: 3 free PCP visits then $25/$50 Deductible, Coinsurance: $500/$1,000, 30% - OON $6,000/$12,000, 50% Max OOP: $8,250/$16,500 - OON $12,000/$24,000 Rx: $7/$40/$85 after $150/300 Rx deductible (n/a Tier 1)	POS	$1,617.58	$3,229.21	$2,745.72	$4,599.10
UnitedHealthcare Choice Gold EPO 35/65 FD-NG	PCP/Specialist: $35/$65 Deductible, Coinsurance: $450/$900, 0% Max OOP: $10,150/$20,300 Rx: $10/$50/$100	EPO	$1,477.45	$2,948.95	$2,507.50	$4,199.74
UnitedHealthcare Choice Gold EPO 40/70 FD-ND	PCP/Specialist: $40/$70 Deductible, Coinsurance: $0/$0, 0% Max OOP: $9,200/$18,400 Rx: $15/$100/50%	EPO	$1,460.84	$2,915.72	$2,479.26	$4,152.39
UnitedHealthcare Choice Gold EPO 40/60 FD-NB	PCP/Specialist: $40/$60 Deductible, Coinsurance: $1,100/$2,200, 20% Max OOP: $8,500/$17,000 Rx: $15/$50/50% up to $800	EPO	$1,427.45	$2,848.96	$2,422.51	$4,057.25
UnitedHealthcare Choice Gold EPO 15/30 FD-M5	PCP/Specialist: $15/$30 Deductible, Coinsurance: $1,750/$3,500, 20% Max OOP: $10,000/$20,000 Rx: $10/$65/50% up to $800	EPO	$1,404.25	$2,802.55	$2,383.06	$3,991.12
UnitedHealthcare Choice Gold EPO 15/50(100) FD-OD	PCP: $15 Adult, $0 Child | Specialist/Designated Network $50, non-DN $100 Deductible, Coinsurance: $2,500/$5,000, 25% Max OOP: $7,150/$14,300 Rx: $10/$50/$100	EPO	$1,364.12	$2,722.30	$2,314.85	$3,876.77
UnitedHealthcare Select Gold EPO 15/30 FD-NS	PCP/Specialist: $15/$30 Deductible, Coinsurance: $1,750/$3,500, 20% Max OOP: $10,000/$20,000 Rx: $10/$65/50% up to $800	EPO	$1,391.24	$2,776.53	$2,360.95	$3,954.05
UnitedHealthcare Choice Gold EPO HSA 1800/100% FD-NL	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: $1,800/$3,600, 0% Max OOP: $5,500/$8,900 Rx: Deductible then $5/$45/$90	EPO HSA	$1,432.31	$2,858.67	$2,430.76	$4,071.08
UnitedHealthcare Choice Gold EPO HSA 2000/80% FD-M7	PCP/Specialist: Deductible then 20% coinsurance Deductible, Coinsurance: $2,000/$4,000, 20% Max OOP: $5,000/$10,000 Rx: Deductible then $5/$45/$90	EPO HSA	$1,396.26	$2,786.56	$2,369.48	$3,968.34
UnitedHealthcare Choice Gold EPO HSA 2500/100% FD-NM	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: $2,500/$5,000, 0% Max OOP: $5,500/$8,900 Rx: Deductible then $5/$45/$90	EPO HSA	$1,391.09	$2,776.22	$2,360.68	$3,953.61

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Orange, Putnam, Dutchess, Ulster, Sullivan & Delaware

Silver	BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket		Employee	Emp/Spouse	Emp/Child(ren)	Family
Anthem Silver EPO 40/80	PCP/Specialist: $40/$80 Deductible, Coinsurance: $3,700/$7,400, 50% Max OOP: $12,000/$24,000 Rx: $25/$75/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$1,761.54	$3,517.12	$2,990.45	$5,009.37
Anthem Silver EPO HSA 4100	PCP/Specialist: Deductible then $20/$50 Deductible, Coinsurance: $4,100/$8,200, 30% Max OOP: $8,500/$17,000 Rx: Deductible then $10/30%/50% - Base	EPO HSA	$1,687.50	$3,369.05	$2,864.58	$4,798.37
Anthem Blue Access Silver Guided Adv EPO 35(65)/50(100)	Preferred PCP/(PCP) $35/($65) | Preferred Specialist/(Specialist) $50/($100) Deductible, Coinsurance: $5,000/$10,000, 50% Max OOP: $9,500/$19,000 Rx: Deductible then $15/50%/50% - Base	EPO	$1,622.27	$3,238.59	$2,753.70	$4,612.46
Anthem Blue Access Silver EPO 40/80	PCP/Specialist: $40/$80 Deductible, Coinsurance: $3,700/$7,400, 50% Max OOP: $12,000/$24,000 Rx: $25/$75/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$1,606.47	$3,206.98	$2,726.83	$4,567.42
Anthem Blue Access Silver EPO 35/80	PCP/Specialist: $35/$80 Deductible, Coinsurance: $5,000/$10,000, 50% Max OOP: $12,000/$24,000 Rx: $20/$75/50% after $200/400 Rx deductible (n/a Tier 1) - Base	EPO	$1,593.46	$3,180.97	$2,704.72	$4,530.35
Anthem Blue Access Silver EPO HSA 3300	PCP/Specialist: Deductible then $30/$60 Deductible, Coinsurance: $3,300/$6,600, 30% Max OOP: $8,500/$17,000 Rx: Deductible then $10/30%/50% - Base	EPO HSA	$1,567.85	$3,129.75	$2,661.18	$4,457.36
UnitedHealthcare Choice Silver EPO HSA 3500/100% FD-MZ	PCP/Specialist: Deductible then $40/$60 Deductible, Coinsurance: $3,500/$7,000, 0% Max OOP: $8,700/$17,400 Rx: Deductible then $15/$35/$75	EPO HSA	$1,242.18	$2,478.41	$2,107.55	$3,529.23
UnitedHealthcare Choice Silver EPO HSA 4000/80% FD-M8	PCP/Specialist: Deductible then 20% coinsurance Deductible, Coinsurance: $4,000/$8,000, 20% Max OOP: $8,700/$17,400 Rx: Deductible then $15/$35/$75	EPO HSA	$1,213.18	$2,420.42	$2,058.25	$3,446.58
UnitedHealthcare Choice Silver EPO 15/50(100) FD-OF	PCP: $15 Adult, $0 Child | Specialist: Designated Network $50, non-DN $100 Deductible, Coinsurance: $7,000/$14,000, 25% Max OOP: $10,500/$21,000 Rx: $10/$50/$100 after $100/member Rx deductible (n/a Tier 1)	EPO	$1,211.46	$2,416.98	$2,055.32	$3,441.68
UnitedHealthcare Choice Silver EPO 30/75 FD-M6	PCP/Specialist: $30/$75 Deductible, Coinsurance: $4,250/$8,500, 50% Max OOP: $9,900/$19,800 Rx: $15/$65/50% up to $800; after $100/300 Rx deductible (n/a Tier 1)	EPO	$1,209.73	$2,413.52	$2,052.38	$3,436.75

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Mid-Hudson

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Orange, Putnam, Dutchess, Ulster, Sullivan & Delaware

Bronze	BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket		Employee	Emp/Spouse	Emp/Child(ren)	Family
Anthem Blue Access Bronze EPO HSA 6300	PCP/Specialist: Deductible then $25/$75 Deductible, Coinsurance: $6,300/$12,600, 50% Max OOP: $8,500/$17,000 Rx: Deductible then 50%/50%/50% - Base	EPO HSA	$1,451.00	$2,896.04	$2,462.52	$4,124.33
UnitedHealthcare Choice Bronze EPO 6150 FD-NH	PCP/Specialist: Deductible then $35/$60 Deductible, Coinsurance: $6,150/$12,300, 30% Max OOP: $9,200/$18,400 Rx: Deductible then $10/$40/$60	EPO	$1,120.55	$2,235.15	$1,900.77	$3,182.57

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